

**PATENT APPLICATION FEE DETERMINATION RECORD**

Effective December 8, 2004

*09/196338*

**CLAIMS AS FILED - PART I**

|   | (Column 1)           | (Column 2)   |
|---|----------------------|--------------|
| TOTAL CLAIMS  |                      |              |
| FOR   | NUMBER FILED         | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | <i>20</i> minus 20 = | *            |
| INDEPENDENT CLAIMS  | <i>3</i> minus 3 =   | *            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |                      |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |    | RATE      | FEE    |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 150.00 | OR | BASIC FEE | 300.00 |
| X\$ 25=   |        | OR | X\$50=    |        |
| X100=     |        | OR | X200=     |        |
| +180=     |        | OR | +360=     |        |
| TOTAL     |        | OR | TOTAL     |        |

**CLAIMS AS AMENDED - PART II**

*01/105*

|   | (Column 1)                       |       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | * <i>3</i>                       | Minus | ** <i>20</i>                       | = <i>/</i>    |
| Independent   | * <i>3</i>                       | Minus | *** <i>3</i>                       | = <i>/</i>    |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |               |

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

| RATE       | ADDI-TIONAL FEE |    | RATE       | ADDI-TIONAL FEE |
|------------|-----------------|----|------------|-----------------|
| X\$ 25=    |                 | OR | X\$50=     |                 |
| X100=      |                 | OR | X200=      |                 |
| +180=      |                 | OR | +360=      |                 |
| TOTAL      |                 | OR | TOTAL      |                 |
| ADDIT. FEE |                 | OR | ADDIT. FEE |                 |

*RCE - 1-23-06*

|   | (Column 1)                       |       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | * <i>8</i>                       | Minus | ** <i>20</i>                       | =             |
| Independent   | * <i>3</i>                       | Minus | *** <i>3</i>                       | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |               |

| RATE       | ADDI-TIONAL FEE |    | RATE       | ADDI-TIONAL FEE |
|------------|-----------------|----|------------|-----------------|
| X\$ 25=    |                 | OR | X\$50=     |                 |
| X100=      |                 | OR | X200=      |                 |
| +180=      |                 | OR | +360=      |                 |
| TOTAL      |                 | OR | TOTAL      |                 |
| ADDIT. FEE |                 | OR | ADDIT. FEE |                 |

|   | (Column 1)                       |       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | *                                | Minus | **                                 | =             |
| Independent   | *                                | Minus | ***                                | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |               |

| RATE    | ADDI-TIONAL FEE |    | RATE   | ADDI-TIONAL FEE |
|---------|-----------------|----|--------|-----------------|
| X\$ 25= |                 | OR | X\$50= |                 |
| X100=   |                 | OR | X200=  |                 |
| +180=   |                 | OR | +360=  |                 |